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TO: U.S. Patent and Trademark Office
Examiner: Tri M. Mai Group: 3727
Fax #703-872-9306

FROM: James E. Cole, Reg. No. 50,530

DATE: February 4, 2004

PAGES: 11 in total (including cover sheet)

RE: U.S. Patent Application No. 09/876,336

Remarks: This facsimile is a response to the Office Action having a mailing date of November 4, 2003.

Enclosed is:

- (1) Transmittal Form;
- (2) Amendment D.

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8

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PTO/SB/21 (08-03)

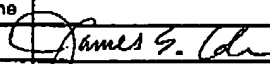
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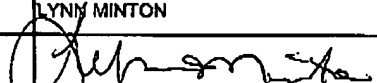
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/876,836
	Filing Date	08/07/2001
	First Named Inventor	LUKER
	Art Unit	3727
	Examiner Name	MAI
Total Number of Pages in This Submission	Attorney Docket Number	CG-838

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FACSIMILE TRANSMITTAL FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	JAMES E. COLE, Reg. No. 50,530
Signature	
Date	02/04/2004

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In re Application of :
C. Edward Luker :
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:
Serial No.: 09/876,336 : Examiner: T. M. Mai
:
Filed: 6/07/01 : Art Group: 3727
:
For: Double Shell Closure with Support
Ribs

AMENDMENT D UNDER 37 CFR § 1.111

Commissioner for Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated November 4, 2003 reconsideration of the above referenced application is respectfully requested. Please amend the application as follows:

Amendments to the Claims begin on page 2 of this response.

Remarks/Arguments begin on page 7 of this response.